



Health Services
LOS ANGELES COUNTY

November 12, 2009

**Los Angeles County
Board of Supervisors**

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TO: Each Supervisor

FROM: John F. Schunhoff, Ph.D. 
Interim Director

SUBJECT: **GRADUATE MEDICAL EDUCATION QUARTERLY REPORT
THIRD CALENDAR QUARTER (JUL-SEPT) 2009**

The Graduate Medical Education (GME) Quarterly Report for the third calendar quarter of 2009 is attached. Information contained in this report is compiled and reviewed by the Office of Clinical Affairs and Affiliations for all Los Angeles County sponsored residency training programs as follows:

I. Training Program Accreditation Status and Housestaff Totals (Attachment I)

<u>Total Housestaff:</u>	<u>1,493</u> (Academic Year 2009-2010)
LAC+USC	916
Harbor-UCLA	490
Olive View	87

II. Medical Specialty/Subspecialty Board Certification Results (Attachment II)

Medical specialty/subspecialty board certification results for 1,938 housestaff who completed County training programs from 2006 through 2009 are presented in this attachment. The attachment has been revised to graphically depict certification totals for four years rather than the three-year totals presented in prior reports. This was done in order to capture certification achievement for those medical specialties that are required to complete "in-practice" requirements prior to becoming eligible to take certifying examinations. In-practice time requirements range from twelve (12) to twenty-two (22) months.

The next verification of board certification status will occur in April 2010, which will provide updated results for years 2006 through 2009. Drew University voluntarily withdrew from its role as primary institutional sponsor at Martin Luther King-Harbor (MLK-H) Hospital effective July 1, 2007, however, board certification reporting for

MLK-H will continue until the 2007 candidates are deleted from the four-year running totals.

III. Facility Compliance with Resident Supervision Guidelines (Attachment III)

First Quarter of Calendar Year 2009 Summary

System-wide audit results for seventeen (17) resident supervision indicators far exceeded the eighty percent (80%) compliance threshold. Corrective action plans addressing noncompliance, are required to be submitted to the facility governing body when the eighty percent (80%) compliance threshold is not met. No corrective action plans will be required for this audit period. Facilities demonstrating the best performance and/or a greater than fifteen percent (15%) improvement receive annual cash awards for the purchase of equipment for patient care.

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Each Supervisor
November 12, 2009
Page 2

We have determined that this quarterly report should become a semi-annual report for presentation in October and April. This will eliminate redundant information. Therefore, unless otherwise instructed by your Board, the next report on the status of Graduate Medical Education will be provided by April 30, 2010.

If you have any questions or need additional information, please let me know.

JFS:pd
506:015

Attachments

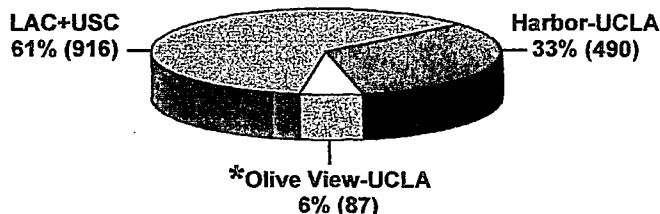
c: Chief Executive Officer
Acting County Counsel
Executive Officer, Board of Supervisors

Los Angeles County Graduate Medical Education Programs, Accreditation Status and Housestaff Totals 2009-2010

LAC+USC Medical Center

Program	Status
Institution	Favorable
Anesthesiology	Continued Full Accreditation
Anes: Pain Management	Accredited USC Integrated
Colon & Rectal Surgery	Continued Full Accreditation
Dermatology	Continued Full Accreditation
Dentistry	Full Accreditation ADA USC Integrated
Oral Maxillofacial Surgery	Accredited ADA USC Integrated
Emergency Medicine	Continued Full Accreditation
Family Medicine	Continued Full Accreditation USC Integrated
Internal Medicine	Continued Full Accreditation
Int Med: Cardiology	Full Accreditation
Int Med: Card-Intervent	Full Accreditation USC Integrated
Int Med: Electrophysiology	Full Accreditation USC Integrated
Int Med: Endocrinology	Continued Accreditation
Int Med: Gastroenterology	Continued Accreditation
Int Med: Geriatrics	Continued Accreditation
Int Med: Hematology	Continued Accreditation
Int Med: Infectious Disease	Continued Accreditation
Int Med: Nephrology	Continued Accreditation
Int Med: Oncology	Continued Accreditation
Int Med: Pulmonary/Crit Care	Continued Accreditation
Int Med: Rheumatology	Continued Full Accreditation
Neurological Surgery	Full Accreditation
Neurology	Continued Full Accreditation
Neuro: Neurophysiology	Accredited
Nuclear Medicine	Full Accreditation
Obstetrics & Gynecology	Full Accreditation
OBGYN: Endocrin/Infertility	Full Accreditation CREOG
OBGYN: Maternal/Fetal	Full Accreditation CREOG
GYN Oncology	Full Accreditation CREOG
Ophthalmology	Continued Full Accreditation
Orthopaedic Surgery	Continued Full Accreditation
Ortho: Hand	Accredited
Otolaryngology	Continued Full Accreditation
Pathology	Continued Full Accreditation
Cytopathology	Continued Accreditation
Hematopathology	Continued Accreditation
Neuropathology	Continued Accreditation
Selective Pathology	Initial Accreditation
Pediatrics	Continued Full Accreditation
Peds: Allergy/Immunology	Full Accreditation
Peds: Infectious Disease	Accredited
Peds: Medicine	Accredited
Peds: Neonatology	Continued Accreditation
Plastic Surgery	Full Accreditation
Plastic Surgery: Hand	Full Accreditation
Psychiatry	Continued Full Accreditation
Psych: Child/Adolesc	Continued Accreditation
Psych: Forensic	Continued Accreditation
Radiation Oncology	Continued Full Accreditation
Radiology	Continued Full Accreditation
Rad: Neuro	Accredited USC Integrated
Rad: Vasc/Interv	Accredited USC Integrated
Surgery	Continued Full Accreditation
Cardiothoracic Surgery	Full Accreditation
Surgical Critical Care	Full Accreditation
Vascular Surgery	Accredited USC Integrated
Urology	Full Accreditation

Housestaff
Total
1,493



Harbor-UCLA Medical Center

Program	Status
Institution	Favorable
Anesthesiology	Continued Full Accreditation
Emergency Medicine	Continued Full Accreditation
Emerg: Ultrasound	Accredited CASE
Family Medicine	Continued Full Accreditation
Family Med: Sports Med	Accredited
General Dentistry	Accredited ADA
Oral Maxillofacial Surgery	Accredited ADA
Internal Medicine	Continued Full Accreditation
Int Med: Cardiology	Continued Accreditation
Int Med: Card-Intervent	Continued Accreditation
Int Med: Dermatology	Provisional Accreditation
Int Med: Endocrinology	Continued Accreditation
Int Med: Gastroenterology	Continued Accreditation
Int Med: Hematology/Oncology	Continued Accreditation
Int Med: Infectious Disease	Continued Accreditation
Int Med: Medical Genetics	Accredited (UCLA Integrated)
Int Med: Nephrology	Continued Accreditation
Int Med: Pulmonary/Crit Care	Accredited
Int Med: Rheumatology	Accredited (UCLA Integrated)
Neurology	Continued Full Accreditation
Neuro: Child	Continued Accreditation w/Warning
Neuro: EEG	Accredited AEEGS
Obstetrics & Gynecology	Continued Full Accreditation
OBGYN: Maternal/Fetal	Accredited CREOG
OBGYN: Pelvic/Recon Surg	Accredited CREOG
Orthopaedic Surgery	Continued Full Accreditation
Pathology	Continued Full Accreditation
Pediatrics	Continued Full Accreditation
Peds: Child Abuse	Accredited
Peds: Critical Care	Continued Accreditation
Peds: Emergency Med	Continued Accreditation
Peds: Endocrinology	Continued Accreditation
Peds: Infectious Disease	Continued Accreditation
Peds: Neonatology	Continued Accreditation w/Warning
Psychiatry	Continued Full Accreditation
Psych: Child/Adolesc	Continued Full Accreditation
Radiology	Continued Full Accreditation
Surgery	Full Accreditation
Surg: Vascular	Continued Accreditation

* Olive View-UCLA Medical Center

Program	Status
Institution	Not Required
Internal Medicine	Continued Full Accreditation
Int Med: Hematology/Oncology	Continued Full Accreditation
Int Med: Nephrology	Continued Full Accreditation
Int Med: Rheumatology	Continued Accreditation

* UCLA employed housestaff = 87 (County-sponsored, UCLA-employed)

Accredited by the American Dental Association (ADA)

Accredited by the American Electroencephalogram Society (AEEGS)

Accredited by the Consortium for the Accreditation of Sonographic Education (CASE)

Accredited by the Council on Resident Education in OB&GYN (CREOG)

All others:

Accredited by the Accreditation Council for Graduate Medical Education (ACGME)

Glossary of Program Accreditation Status

Accredited

Subspecialties only - A Review Committee confers the status of "Accredited" when the dependent subspecialty program has demonstrated substantial compliance with program requirements.

Accreditation with Warning

Subspecialties only - A Review Committee may grant "Accreditation with Warning" when the dependent subspecialty has been found to have one or more area of non-compliance with program requirements that are of sufficient substance to require prompt correction.

Continued Full Accreditation

"Continued Full Accreditation" status is conferred when a Review Committee determines that a program continues to demonstrate substantial compliance with program requirements.

Favorable

"Favorable" status is conferred when a Review Committee determines that the institution is in substantial compliance with the essential components of Graduate Medical Education.

Full Accreditation

A Review Committee grants "Full Accreditation" when a program holding provisional accreditation or probationary accreditation demonstrates substantial improvement and/or compliance with program requirements.

Initial Accreditation

"Initial Accreditation" is conferred when a Review Committee determines that a proposal for a new program substantially complies with all program requirements.

Probationary Accreditation

"Probationary Accreditation" is conferred when the Review Committee determines that a program has failed to demonstrate substantial compliance with program requirements.

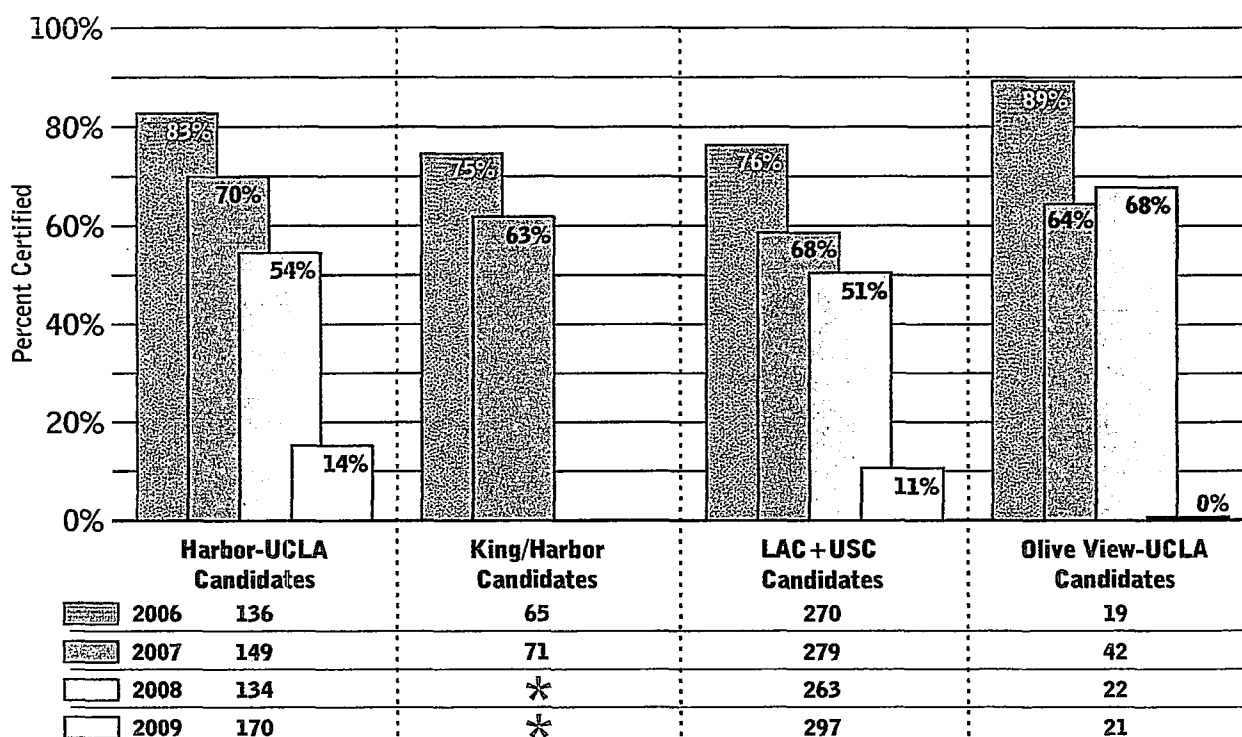
Provisional Accreditation

New programs go through a period of "Provisional Accreditation" which implies that a program is in the developmental stage. Provisional Accreditation can be conferred when a program's accreditation was withdrawn and the program has applied to become newly accredited.

2006-2009

Medical Specialty Board Certification Verification Results by Facility as of October 2009

Total Candidates = 1,938



* Drew University voluntarily withdrew from its role as primary institutional sponsor at King-Harbor Hospital effective July 1, 2007. Board certification reporting will continue until the 2006-07 candidates are eliminated from the four-year running totals.

2006 - 2009 Board Certification Results as of October 2009

As of October 2009, board certification verification was completed for an aggregate total of 1,938 housestaff who completed County training programs in years 2006 through 2009. Fifty-three percent of the total have achieved medical specialty board certification.

NOTE

The majority of candidates who recently completed training in June, 2009, have not tested. Many specialty boards will open examinations in the latter months of 2009 and the early months of 2010. In some cases, testing has occurred but the results have not yet posted. Additionally, medical specialties such as Obstetrics/Gynecology, Emergency Medicine, Orthopedic Surgery and Urology must complete in-practice requirements before becoming eligible to take the certifying exams. In-practice time requirements for these specialties range from twelve (12) to twenty-two (22) months.

Verification Source:

The American Board of Medical Specialties (ABMS)

Error Rate +/- 2%

Los Angeles County Department of Health Services

Audit of Compliance with Resident Supervision Guidelines

DHS Policy Number 310.2

Calendar Year 2009, First Quarter Summary

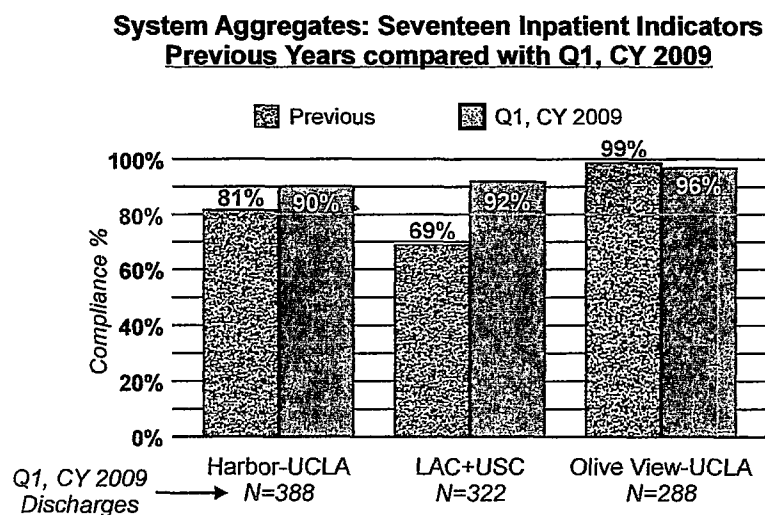
In the first quarter of calendar year 2009, nurses from the Department of Health Services' Quality Improvement Patient Safety Program (DHSQIPS) audited each teaching facility abstracting compliance information for seventeen inpatient indicators. The indicators, based on resident supervision guidelines, included eight surgical indicators, three ward/discharge indicators, three ICU indicators and three invasive procedure indicators.

Data was collected from a sampling of hospital discharges with focus on the following services:

FACILITY	SERVICES REVIEWED
Harbor-UCLA	Internal Medicine, Family Medicine
LAC+USC	Internal Medicine, Oncology, Cardiology
Olive View-UCLA	Internal Medicine

Findings

System aggregates demonstrated significant improvement from previous years. Each facility aggregate exceeded the expected 80% compliance threshold for all indicators during the first quarter of calendar year 2009 as follows:



Each service failing to meet the 80% compliance threshold will continue to submit, to its facility governing body, corrective action plans addressing each deficiency. No corrective action plans will be required for this audit period.